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Bib Data Sheet

CONFIRMATION NO. 7799

SERIAL NUMBER 09/802,588	FILING OR 371(c) DATE 03/08/2001 RULE	CLASS 375	GROUP ART UNIT 2631	ATTORNEY DOCKET NO. 034421-163	
APPLICANTS Alain Chiodini, Mountain View, CA;					
** CONTINUING DATA *****					
** FOREIGN APPLICATIONS *****					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 05/14/2001					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY CA	SHEETS DRAWING 5	TOTAL CLAIMS 10	INDEPENDENT CLAIMS 2
ADDRESS Robert E Krebs THELEN REID & PRIEST LLP P O Box 640640 San Jose ,CA 95164-0640					
TITLE Timing misalignment estimation					
FILING FEE RECEIVED 355	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



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CONFIRMATION NO. 7799

SERIAL NUMBER 09/802,588	FILING DATE 03/08/2001 RULE	CLASS 455	GROUP ART UNIT 2681	ATTORNEY DOCKET NO. NBAN0007	
APPLICANTS Alain Chiodini, Mountain View, CA;					
** CONTINUING DATA *****					
** FOREIGN APPLICATIONS *****					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 05/14/2001			** SMALL ENTITY **		
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no		STATE OR COUNTRY CA	SHEETS DRAWING 5	TOTAL CLAIMS 10	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance					
Verified and Acknowledged _____ Examiner's Signature Initials					
ADDRESS 22862					
TITLE Timing misalignment estimation					
FILING FEE RECEIVED 355	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		